

# APPLICATION

## SFY2022 Regional Water Plan Seed Grant

1. Project Title:

2. Lead Organization:      Name:  
   Address:  
   Address2:  
   City, GA Zip:  
   Phone:

Primary Contact:      Name:  
   Title:  
   Organization:  
   Address:  
   Address2:  
   City, GA Zip:  
   Phone:  
   E-mail:

Project Start Date:

Project End Date:

Grant Amount: \$

Match Amount: \$

Cash Amount: \$

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Total Project  
Amount: \$

3. Project Background & Goals:

*(Insert Text)*

4. Project Activities:

*(Repeat Format Below as Needed)*

Project Activity #1:

*(Insert Text)*

Task 1:

*(Insert Text)*

Deliverables:

*(Insert Text)*

**Measures of Success:**

*(Insert Text)*

**Task 2:**

*(Insert Text)*

**Deliverables:**

*(Insert Text)*

**Measures of Success:**

*(Insert Text)*

**Project Activity #2:**

*(Insert Text)*

**Task 3:**

*(Insert Text)*

**Deliverables:**

*(Insert Text)*

**Measures of Success:**

*(Insert Text)*

**Task 4:**

*(Insert Text)*

**Deliverables:**

*(Insert Text)*

**Measures of Success:**

*(Insert Text)*

**Project Activity ##:**

Provide the **XXXX** Regional Water Planning Council with periodic written or verbal project updates

**Task ##:** Provide the Council with project updates at a minimum of once every six (6) months via email or during Council meetings

**Deliverables:** Council meeting minutes containing verbal updates or emails containing written updates

**Measures of Success:** Approximately four (4) project updates provided to the Council informing them of the progress of the watershed management plan

**Project Activity ##:**

Prepare & submit Quarterly & Close-Out Reports & Invoices to EPD

**Task ##:** Submit Quarterly Reports, including WBE/MBE, reports and invoices

**Deliverables:** Quarterly progress reports to EPD Project Manager by the 15<sup>th</sup> of January, April, July and October of each year

**Measures of Success:** Documentation of progress and expenditures according to Project Schedule

**Task ##:** Final Invoice & Close-Out Report

**Deliverables:** Final Invoice and Close-Out Report submitted within 30 days of contract expiration to EPD

**Measures of Success:** On time submittal of Final Invoice and Close-out Report reviewed and approved by GA EPD

**5. Roles and Responsibilities of Partnering Organizations:**

Organization Name	Specific Responsibilities
<i>(Lead Organization)</i>	<ul style="list-style-type: none"> <li>Account for/contribute to <b>40% (revise if greater)</b> of total project costs in matching expenses or in-kind services</li> <li>Request payments from GAEPD on a quarterly basis</li> <li>Pay funds to appropriate contractor(s) and vendor(s), and request reimbursements from GAEPD</li> <li>Track all grant funds expended and all match values provided in accordance with the implementation schedule</li> <li>Track all project activities in accordance with the implementation schedule</li> <li>Complete and submit quarterly progress reports with invoices to GAEPD by January 15<sup>th</sup>, April 15<sup>th</sup>, July 15<sup>th</sup>, and October 15<sup>th</sup> of each project year (Payment of invoice is contingent on work completed and a review and approval of the quarterly report.)</li> <li>Complete and submit close-out report at conclusion of project <i>(ADD OTHERS AS APPROPRIATE)</i></li> </ul>
<b>GAEPD</b>	<ul style="list-style-type: none"> <li>Provide <b>60% (revise if less)</b> of total project costs</li> <li>Review and approve project deliverables</li> <li>Participate in meetings, as appropriate</li> <li>Provide project oversight and contract management</li> <li>Provide monitoring guidance and training</li> </ul>
Other Invited Partners	Specific Responsibilities
<i>(Participating Qualified Organization)</i>	<ul style="list-style-type: none"> <li>General Stakeholder</li> <li>Letter of Commitment describing functions attached <i>(ADD OTHERS AS APPROPRIATE)</i></li> </ul>
<i>(Local Governments)</i>	<ul style="list-style-type: none"> <li>Serve on Project Advisory/Steering Committee</li> <li>Render in-kind services to Match as described in attached Letter of Commitment <i>(ADD OTHERS AS APPROPRIATE)</i></li> </ul>

**6. Project Location:***(Insert text and/or attach map)*

**7. Project Budget:**

Item	Item Description	Grant Funds (60% Maximum)	Matching Funds (40% Minimum, 10% as Cash)		Total
			In Kind	Cash	
A	Personnel:  One (1) (Name position if any) - xx FTE (\$xx/year) for 1 year Description of Duties: (explain here)				
	<b>Sub Total:</b>				
B	Fringe Benefits:  One (1) (Name position if any) - xx FTE (xx%) for 1 year				
	<b>Sub Total:</b>				
C	Travel:  Staff Position: (Name position if any) Purpose of Travel: (Explain here) xx miles x \$0.575/mile				
	<b>Sub Total:</b>				
D	Equipment:  Equipment: (What kind) Purpose/use: (describe)				
	<b>Sub Total:</b>				
E	Supplies:  Supplies: (What kind) Purpose/Use: (describe)				
	<b>Sub Total:</b>				
F	Contractual:  Contractor Name: (enter name) Description of Duties: (describe)				
	<b>Sub Total</b>				
G	Other:				
	<b>Sub Total</b>				
H	<b>Total Direct Charges: (Sum of A-G)</b>				
I	Indirect Charges: Indirect Charge Rate	N/A		N/A	
J	<b>Total: (Sum of H and I)</b>				

**Budget Narrative:**

**(A) Personnel Narrative:**

**(B) Fringe Narrative:**

**(C) Travel Narrative:**

**(D) Equipment Narrative:**

**(E) Supplies Narrative:**

**(F) Contractual Narrative:**

**(G) Other Narrative:**

**(I) Indirect Charges Narrative:**

**8. Project Implementation & Drawdown Schedule: Attached**  
*(Attach Excel Spreadsheet)*

**9. Project Attachment(s):**  
*(List all documents attached to the application)*